result from serous exudation or hemorrhage into the wall of the bowel. The exact relation of the renal changes is not clear. Hematuria can occur from localized changes in the renal vessels, as in the intestine, and this was found to be true in case 10, when the kidneys at autopsy were found to contain numerous focal hemorrhages without a nephritis. In some of the cases study showed a markedly reduced renal function, and in others the question was raised whether or not the renal manifestations were not due to the same changes occurring in the kidney, which occurred in the skin or other tissues. This question is difficult to solve at the present time. It is also possible that the so-called "uremia" occurring occasionally in these cases is due to similar vascular changes in the brain, and is not secondary to the renal lesion. Christian concludes that there is a definite clinical entity, in which skin lesions of the erythema type occur in combination with visceral lesions of the same character. The visceral lesions may occur unaccompanied by skin manifestations, and as the symptomatology within the group is very complex, diagnosis of the visceral lesions may be very difficult in the absence of skin lesions at a given time.

SURGERY

UNDER THE CHARGE OF

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Arteriolasty after Arteriosecretion. — HOFFMANN (*Zentralbl. f. Chir.*, 1918, xliii, 981) says that if after the resection of an aneurysm, a free bleeding occurs from the peripheral cut end of the main arterial trunk, one may depend upon the sufficiency of the collateral circulation after ligation of both stumps. In other, older patients, the collateral circulation is not sufficiently good to rely upon such a procedure, lest the nutrition of the limb below should not be maintained. But there is a certain amount of collateral circulation in every case of aneurysm and one might give sufficient aid to it by conserving a portion of the main arterial current. Hoffmann proceeded as follows in 4 cases of popliteal aneurysm: After extirpation of the aneurysmal sac which extended downward almost to the bifurcation of the popliteal artery and upward almost the length of this artery; a union of the central with the peripheral cut ends was impossible. The posterior tibial artery was divided just above where it gives off the peroneal artery. The peripheral cut ends here was ligated and the open central end turned upward for circular union with the central cut end of the popliteal artery. The peripheral stump of the popliteal was ligated close to its bifurcation into the anterior and posterior tibial arteries. The lumen of the turned up upper portion of the posterior tibial is seen to be continuous with that of the anterior tibial, and when after dividing obliquely

the open end of the posterior tibial for union with the larger opening in the popliteal artery, these two are united by suture, the arterial current is allowed an uninterrupted course from the popliteal into the anterior tibial through the connecting portion of the posterior tibial. The conservation of the anterior tibial current seems to have been sufficient with the poor collateral circulation, because a good result followed and the patient returned to work.

The Spirochetal Content of the Spinal Fluid of Tabes, General Paresis, and Cerebrospinal Syphilis.—Wile (*Am. Jour. Syph.*, January, 1917, p. 81) says that the question of the spirochetal contents of the spinal fluid is a matter of very great importance not only for the bearing it has on the pathology of the disease, but also from another standpoint. The spinal puncture has today become a routine measure in all well regulated hospitals and is performed, or should be at least at some time during every syphilitic's lifetime. It not infrequently happens in withdrawing the stilette or in collecting the fluid that more or less is spilled over the operator's or attendant's fingers, and in the laboratory the possibility of the fluid being a source of infection is customarily entirely disregarded. If spirochetes are present in spinal fluid the same great care should be used in examination as is employed in the examination of other syphilitic products and secreta. During the past year Wile has inoculated the spinal fluid of eight cases of acute cerebral syphilis, general paresis, and tabes dorsalis, into the rabbit testis. He concludes that the spinal fluid from cases of early syphilis, of tabes and of paresis, contains spirochetes as demonstrated by transplantation into the rabbit testis. The spirochetes may be present in moderate, or even large numbers in the rabbit testis without producing the classic gumma or chancre of the testis. In some cases slight enlargement of the testis itself may be noted. In still others spirochetes were demonstrated in which no increase in size of the testis was noted. In no case in this series were spirochetes demonstrable in the fluid itself before inoculation. The spinal fluid, at least in cases in which the nervous system is involved, must be regarded as infectious, and as such should be handled with the same care as other syphilitic secreta.

The Present Status of Roentgentherapy in the Management of Deep-seated Malignancy.—Case (*Surg., Gynec. and Obst.*, 1917, xxiv, 581) says that the use of the roentgen rays and radium, at least for the present should be restricted to pre- and postoperative irradiation and to the treatment of inoperable malignancies. Radiotherapy does destroy cancer cells. This destruction can be brought about without serious injury to the neighboring normal tissues. The destructive effect is a deep one, both for radium and the roentgen rays. The ideal method is to employ a combination of radium and roentgen therapy in all cases of tumors affecting the cavities of the body. There is no question about the possibility of effecting a local cure of cancer in the human body. We lose our patients in the end because of inaccessible metastases. But in the way of palliation of suffering, prolongation of useful life, and, in a few unexpected cases, clinical cure lasting a decade or longer, there is no known therapeutic agency that can equal the results of radiotherapy.